

2JR 605-249 60-561 **PART B—ISSUE FEE TRANSMITTAL**

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. Correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "PRESS" for maintenance fee notices with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

CORRESPONDENCE ADDRESS		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
<p>MAIL ROOM OCT 21 1994 PAT & TRADEMARK OFF</p> <p>PATREA L. PAUL KILPATRICK & CODY 1100 PEACHTREE STREET, STE. 2800 ATLANTA, GA 30309-4530</p> <p>18N2/0726</p>		INVENTOR'S NAME	
		Street Address	
		City, State and ZIP Code	
		CO-INVENTOR'S NAME	
		Street Address	
City, State and ZIP Code		<input type="checkbox"/> Check if additional changes are on reverse side	

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/283,367	11/30/92	009	WARE, D	1808 07/26/94

First Named Applicant: **SASIGEKHARAN, RAMNATH**

TITLE OF INVENTION
PURIFICATION OF HEPARINASE I, II, AND III FROM FLAVOBACTERIUM HEPARINU
II (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
MIT5081/6124	435-220.000	C94	UTILITY	YES	\$585.00	10/26/94

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
	<p>1. Kilpatrick & Cody</p> <p>2. _____</p> <p>3. _____</p>

DO NOT USE THIS SPACE

040 AH 10/31/94 07983367 1 242 605.00 CK

040 AH 10/31/94 07983367 1 561 60.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE: Massachusetts Institute of Technology and University of Iowa Research Foundation		<input checked="" type="checkbox"/> Issue Fee, <input checked="" type="checkbox"/> Advanced Order - # of Copies <u>20</u> (Minimum of 10)	
(2) ADDRESS: (CITY & STATE OR COUNTY) Cambridge, MA and Iowa City, IA, respectively		6b. The following fees should be changed to:	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION Massachusetts and Iowa, respectively		DEPOSIT ACCOUNT NUMBER <u>11-0855</u> (ENCLOSED PART C) <input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____ <input checked="" type="checkbox"/> Any Deficiencies In Enclosed Fees (Minimum of 10)	
A. <input type="checkbox"/> This application is NOT assigned. <input checked="" type="checkbox"/> Assignment is being previously submitted to the Patent and Trademark Office. <input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above. (Signature of party in interest of record) <u>[Signature]</u> (Date) <u>10/21</u>	
PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee date will appear on the patent inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.			
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.			

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE



PART C—CHARGE TO DEPOSIT ACCOUNT

1. CORRESPONDENCE ADDRESS

PATREA L. PABST
MILPATRICK & CO. VY
1100 PEACHTREE STREET, S.W.
ATLANTA, GA 30309-4500

15N210726

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/983,367	11/30/92	008	WARE, D	1808 07/26/94
First Named Applicant: SASISEKHARAN, RAMNATH				

TITLE OF INVENTION: PURIFICATION OF HEPARINASE I, II, AND III FROM FLAVOBACTERIUM HEPARINU
M (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1. N11598146124	435-220.000	094	UTILITY	YES	\$585.00	10/26/94

DO NOT USE THIS SPACE

2a. The following fees are enclosed:
☒ Issue Fee ☒ Advanced Order - # of Copies 20 (Minimum of 10)
2b. The following fees should be changed to:
DEPOSIT ACCOUNT NUMBER 11-0855
☐ Issue Fee ☐ Advanced Order - # of Copies (Minimum of 10)
☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

NOTE: The Issue Fee will not be accepted from anyone other than applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT